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EV0557

Intergenerational transmission of antisocial personality disorder: Maternal role and its declination

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Antisocial personality disorder is a well-established disease which features space from cruelty to lack of empathy and remorse. Its etiology has been deeply analyzed both for genetic and environmental implications. The role of family context has been underlined throughout the whole psychopathology as an explanation to the etiological conflict between nature and nurture. Even if this conflict seems to be apparently solved, it is still possible to ponder about family implications in terms of causes and consequences. In the antisocial field, maternal role may offer interesting and surprising food for thought. Even if it is commonly believed an intergenerational transmission of aberrant behaviors, particularly in terms of learning behaviors and lack of empathy assimilation, it exists a side part of maternal pathological expression that may play a role in the intergenerational transmission and it is extremely difficult to be detected. Female declination of this disorder may be expressed also through somatic implications and complaints, leading to the hypothesis of a self-reflection of the lack of consideration for other's needs, which is distinctive. It is of extreme importance, particularly in terms of prevention, to consider and identify these connotations of the disorder to be able to try to interrupt the cycle of transmission through generations.

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Paranoia: When criminology predicts vocational prognosis

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Patients with paranoia have always been a group of exiting but daunting patients for mental health professionals. Indeed, the risk of a violent acting out with important aggressive discharges confers to these patients an elevated dangerosity potential. If various criminological aspects of violence in paranoia have been described, their link to functional prognosis of patients have been seldom addressed.

Aim To determine if criminological details of violence acts in paranoia patients predict their functional prognosis.

Methods A retrospective, descriptive and analytic study have been conducted, based on a chart consult. Twenty-three patients with paranoia (i.e. Chronic delusional disorder type jealousy or erotomania in DSM IV) patients have been included. These patients have been hospitalized in the forensic psychiatry department of Razi hospital of Tunis (Tunisia), between 1995 and 2015, after not being held by reason of insanity, according to article 38 of the Tunisian Criminal Code.

Results Delusional disorder types were: jealousy (17), persecution (4), erotomania (1) and claim (1). The majority were married

(18), undereducated (17), with irregular work (13). Forensic acts were uxoricide (15), attempted murder (5), violence against people (2) and destruction of public properties (1). Patients used bladed weapon in most of the cases (13), in the victim's residence (19), with premeditation in (17) of the crimes. Only 5 patients worked regularly after discharge.

Conclusion If our results expose further data concerning potential dangerosity of patients with delusional disorders, they also highlight the marginalized situation of these patients when released back into society.

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Forensic neuropsychiatry and neurocrimen applied to the study of violent, criminal and corrupt behavior

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Objectives – Define the scope of the study of Forensic Neuropsychiatry inherent in violent, criminal and corrupt behavior psychopathological processes;

- characterize to Neurocrimen;
- describe the neurobiological underpinnings of violence;
- analyze the corrupt behavior as a derivation of cognitive bias and distorting processes that lead to social maladjustment;
- propose therapeutic tools addressing violent, criminal and corrupt behavior.

Development Violent, criminal and corrupt behavior currently occupy an enormous preponderance in terms of distorting behaviors collevan degradation of the harmonic organization of social convicencia frequently appear in the media presented under the judicative and moral value, preventing a comprehensive analysis of this issue. We intend dilucidaar under this scenario if these behaviors have a neurobiological basis, or if we neuropathological arguments that lead us to interpret any of these processes in terms signosintomatológicos, and therefore be liable to approach from mental health. For this analysis we implement knowledge from cognitive neucociencia, specifically forensic neuropsychology and neuropsychiatry, the neurocrimen and neuroderecho.

Conclusions Violent, criminal and corrupt behavior have a neurobiological support in statistical terms that allow us to infer distortionary neurobiological processes that result in changes in adaptation to social life. Many of these neurobiological aspects may be characterized in terms neuropathological and, therefore, make some of these behaviors in symptoms and signs. These findings implanted the need to revise legal conclusions static, although still insufficient to transform legal medical paradigms, but we require constant analysis and case by case ratification thereof.

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Mental health care practice in transgender persons deprived of liberty

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